

DOCUMENT RESUME

PS 009 089

ED 135 460

TITLE Statistical Highlights from the National Child Care Consumer Study.

INSTITUTION Office of Human Development (DHEW), Washington, D.C.

SPONS AGENCY Office of Child Development (DHEW), Washington, D.C.

REPORT NO DHEW-CHD-76-31096

PUB DATE 76

NOTE 30p.; For related documents, see PS 008 950-953

EDRS PRICE MF-\$0.83 HC-\$2.06 Plus Postage.

DESCRIPTORS *Child Care; Child Care Centers; *Day Care Services; Delivery Systems; *Early Childhood Education; Family Background; Family Day Care; Financial Support; *Government Role; *National Surveys; Nursery Schools; One Parent Family; Parent Attitudes; *Statistical Surveys; Working Women

ABSTRACT

This summary, which provides statistical and analytical highlights from a survey of current patterns of child care use in the United States, is intended to serve as an introduction to a four-volume report. Encompassing 4,000 one-hour interviews administered to a nationwide sample of households with at least one child under fourteen, the study's conception of child care embodies a broad range of program types. Summary statistics are presented from responses to questions on: basic characteristics of households involved; type and extent of child care used; why and by whom; cost of care; consumer attitudes; and the role of the public. Analytical highlights emphasize the significance of child age, parent employment and marital status in the need for child care services, while also dealing with the great variety of types of care, cost of care and government role. (Author/BF)

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Statistical Highlights From the National Child Care Consumer Study

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
Office of Human Development
Office of Child Development
Head Start Bureau
1976

DHEW Publication No. (OHD) 76-31096

INTRODUCTION

The National Child Care Consumer Study is a relatively complex survey of parent practices and attitudes regarding child care. In its scope, this study encompassed 4,000 one-hour interviews that were administered in person to a nationwide sample. In reviewing the findings in this summary or in the reports, readers should keep in mind that the sample for this survey was not limited only to users of child care, nor restricted by income level or other personal characteristics. The only requirement for eligibility to enter the sample was for a household to have at least one child under fourteen. Furthermore, the study's conception of child care embodies a broad range of program types and there is no minimum number of hours associated with the definition of users in this study.*

The purpose of this summary is to provide statistical and analytical highlights from the study's final reports. All the statistics are presented in this summary without any accompanying interpretations and the analytical highlights are best interpreted with all the supporting data. To present the full context of these results, however, would have made this summary unwieldy, and its purpose as an introduction to the study's findings would then thus have been lost. Without recourse to the full analysis, the likelihood of misunderstanding or misinterpreting these highlights is very real. Readers are therefore cautioned not to draw conclusions or defend positions on child care issues based solely on this summary.

* Several items in the questionnaire were asked only of users. No hours restriction was used for defining this group of respondents. In analysis, however, it is possible to be as restrictive as is desired in defining "users" for special analytical purposes.

Throughout this overview, there are references* to the study's final reports so that interested readers can obtain more detailed information. The four volumes for this study are as follows:

Volume I: Basic Tabulations -- Covers all the data at a surface level with minimum analysis. Includes copy of questionnaire and about 150 tables. Methodology is presented in some detail. Most of the text and tables also appear in Volumes II and III.

Volume II: Current Patterns of Child Care Use in the United States -- Chapters on usage ("simple incidence" and "substantial users") hours, payment mode, costs, and transportation. Strong emphasis on analysis by demographic subgroupings, both households and children. Also included is technical statement of methodology.

Volume III: American Consumer Attitudes and Preferences on Child Care -- Chapters on reasons for using care, satisfaction and preferences, factors influencing selection and discontinuance of types of care, attitudes on working mothers, and the public role.

Volume IV: Supplemental Documentation -- For programmers with access to the data tape. Includes technical statement of methodology from Volume II, documentation on the machine readable files, questionnaire, and tape format specifications. Contains no new data analysis.

The three volumes of data analysis have been prepared independently of each other so that readers can begin with any one of the volumes. Virtually all of the analysis is contained in Volumes II and III; however, Volume I has a copy of the questionnaire and the most complete set of marginals (with some cross-tabulations).

* To explain reference notation, "II, 4-11" would refer to Volume II, Chap. 4, page 11. Where statistics are computed using data from a particular page, the phrase "derived from" is used.

Regarding the study's methodology, data were collected from a stratified national area probability sample of telephone households having at least one child under fourteen. This sample was obtained by telephone screening of some 24,900 randomly-selected households. From among those with children under fourteen, a total of 4,609 interviews were obtained. Interviews were conducted in person at the respondent's home by the field interviewing staff of Chilton Research Services, Inc., under subcontract with Unco. The average administration time was approximately one hour. An overall completion rate of 67% was achieved, with 14% refusals and 19% failures to locate an eligible respondent.*

There were three basic steps to the sample design: selection of primary sampling units (PSU's), selection of central offices (telephone exchanges) and determination of sampling rates within central offices. To assure adequate representation in the summary, the sample design included stratification for geographical region, urban/rural location, household income and racial or ethnic background.

To develop the sample frame, centralized telephone screening was used. Screening interviewers worked from batches of randomly-generated telephone numbers using the area codes and prefixes of the selected telephone exchanges. A brief questionnaire was administered to establish if the household was eligible to participate in the study (i.e. it contained at least one child under fourteen), to identify the person responsible for care of the children and to obtain the demographic information needed for fulfilling the sample design.

* Included in this category are (1) moved from area, (2) youngest child turned fourteen, and (3) unable to contact after four tries.

SUMMARY STATISTICS

Statistics were selected based on their representativeness and direct relationship to day care consumption. Contents of the questionnaire and basic statistics are presented in response to the following questions:

1. What are the basic characteristics of all households with at least one child under fourteen?
2. What types of child care are used?
3. How much care is used?
4. Who uses child care?
5. What do people pay?
6. Why do people use child care?
7. What are parent preferences for different types of care?
8. What are the factors that parents consider in making decisions about child care?
9. What should be the public's role in child care?

It should be noted that the subjects included are not exhaustive of all those subjects contained within the questionnaire. Furthermore, most of the analysis in Volume II and III draw upon more in-depth data processing than is reflected in these statistics. Except where noted, all data has been weighted to national estimates.

1. WHAT ARE THE BASELINE CHARACTERISTICS OF ALL HOUSEHOLDS WITH AT LEAST ONE CHILD UNDER FOURTEEN?

The questionnaire included items that gathered information on the age and relationship of each member in the household, sources of financial support for the children, respondent income, total household income, race/ethnicity, marital status, employment status, type of work, education level, school or job training status, and spouse's employment status.

Basic Respondent* Characteristics

- marital status -- 82% of the respondents are married. (II-3-4)
- race/ethnicity -- 75% of the respondents are white, 14% black, 5% Spanish, and 5% are of other racial or ethnic groups. (II, 3-6)
- employment status -- 63% of all respondents are not working, 24% work full-time, and 13% work part-time; 94% of the spouses work full- or part-time. (II, 3-17 & 3-18)

Household Characteristics

- total numbers -- In the continental U.S., ** there are about 24 million households with at least one child under fourteen (II, 3-2). Of the 48 million children under fourteen, about 19 million are under six. (II, 3-11)
- household size -- About three-fourths of all households have three, four or five members. (II, 3-7)

* Respondents in this survey were those persons who were primarily responsible for raising the children in the household. All the data, unless otherwise noted, are weighted up to national proportions. Therefore, the term, "respondents," actually represents all those with the primary child-rearing responsibility in households with at least one child under fourteen.

** The survey did not include Alaska, Hawaii, or the territories.

- number of children per household -- About three-fourths of all the households have one or two children; 8% of all the households have more than three children. (II, 3-10)
- total household income -- Using the Bureau of Census definition for determining the poverty line*, 15% are below the line, 24% have incomes up to twice the poverty line, and 61% are over twice the poverty line. (II, 3-16)
- government financial support for children -- 11% of all households receive support from public welfare programs (AFDC and "other" programs) and 7% receive assistance from other government sources (e.g., Social Security). (II, 3-14)

* The poverty line is computed based on household size. For a family of four the cut-off for annual income is \$5,050 with twice the poverty line being \$10,000.

2. WHAT TYPES OF CHILD CARE ARE USED?*

Altogether there are fifteen types of child care identified in the questionnaire; none are of principal interest:

| | |
|----------------------------|-----------------------------|
| own home by relative | day care center |
| own home by non-relative | cooperative program |
| other home by relative | before/after school program |
| other home by non-relative | Head Start |
| nursery or preschool | |

The other types of care are:

| | |
|---------------------|--|
| care by spouse | child cares for self and younger sibling |
| by older sibling | public or private school |
| child stays by self | cared for by parent at work |

For each child under fourteen, all types of care being used were recorded. Respondents were asked to identify their "main method" if more than one type of care was used.

Households

- total volume -- 90% of all households (22 million) use at least one of the fifteen types of care (I, 4-4); 62% (15 million) of all households use one of the first nine types of care. (III, 2-2 & 2-3)
- most frequently used types -- Given as percents of all households, the following are the most commonly used of all fifteen types of care:

* Except where noted, statistics in this section are based on reported use of different types, with no restriction on numbers of hours used.

| <u>Type of Care</u> | <u>Percent of all Households*</u> |
|----------------------------|-----------------------------------|
| Own home by relative | 24 |
| Own home by non-relative | 23 |
| Other home by relative | 32 |
| Other home by non-relative | 21 |
| Own home by older sibling | 28 |
| Own home by spouse | 47 |
| Public or private school | 23 |

(derived by using frequencies in I, 4-7, * Includes multiple methods divided by base from I, 4-4)

- use of multiple methods -- Using unweighted percents, 26% of all household's use one method only, 26% use two methods, and 35% use three or more of the fifteen possible methods. (I, 4-7)
- main method of care -- Among users of the first nine types of care, the following types are most frequently used as main method:

| <u>Main Method</u> | <u>Percent of Households Using Principal Methods</u> |
|----------------------------|--|
| Own home by relative | 22 |
| Own home by non-relative | 21 |
| Other home by relative | 27 |
| Other home by non-relative | 16 |

(III, 2-3)

Children

- total volume -- 88% of all children (42 million) are cared for in at least one of the fifteen types (I, 4-3), 55% (26 million) receive care in one of the nine principal methods for at least one hour per week. (I, 4-33)
- use of principal methods -- The following distribution describes the number and percent (of all U.S. children) using each of the first nine methods for at least one hours per week:

| <u>Type of Care</u> | <u>Children (in millions)*</u> | <u>Percent of all Children</u> |
|-----------------------------|--------------------------------|--------------------------------|
| Own home by relative | 9.5 | 20 |
| Own home by non-relative | 9.7 | 20 |
| Other home by relative | 11.3 | 24 |
| Other home by non-relative | 7.1 | 15 |
| Nursery or preschool | 1.9 | 4 |
| Day care center | 1.0 | 2 |
| Cooperative program | .5 | 1 |
| Before/after school program | 1.6 | 3 |
| Head Start | .1 | ** |

(I, 4-33)

* Includes multiple methods.

** Less than .5%.

3. HOW MUCH CARE IS USED?

For each child, the average number of hours per week was obtained for each of the nine principal methods used.

Volume of Care

- number of hours used -- The following describes levels of care received among the nine principal types of care:

| <u>Average Hours per Week</u> | <u>Children (in millions)</u> | <u>Percent of All Children</u> |
|-----------------------------------|-----------------------------------|------------------------------------|
| at least 1 hour | 26.4 | 55 |
| at least 10 hours | 14.2 | 30 |
| at least 30 hours | 5.6 | 12 |

Type of Care

- care used less than ten hours per week -- Except for centers, Head Start and nursery schools, most children use each of the principal types of care less than ten hours per week (e.g., of all children being cared for in own home by relative, 76% receive less than ten hours of care per week):

| <u>Type of Care</u> | <u>Percent of Children Using Respective Types Less Than Ten Hours</u> |
|----------------------------|---|
| Own home by relative | 76 |
| Own home by non-relative | 81 |
| Other home by relative | 74 |
| Other home by non-relative | 67 |
| Nursery or preschool | 47 |
| Day care center | 18 |
| Cooperative program | 84 |
| Before/after school | 79 |
| Head Start | 13 |

(I, 4-11)

- distribution of total hours -- The 418 million hours of care provided each week are distributed as follows among the nine types of care:

| <u>Type of Care</u> | <u>Hours (in millions)</u> | <u>Percent of all Hours</u> |
|----------------------------|----------------------------|-----------------------------|
| Own home by relative | 80.4 | 19.3 |
| Own home by non-relative | 71.8 | 17.2 |
| Other home by relative | 106.7 | 25.5 |
| Other home by non-relative | 83.1 | 19.8 |
| Nursery or preschool | 34.4 | 8.3 |
| Day care center | 26.9 | 6.4 |
| Cooperative program | 3.5 | .8 |
| Before/after school | 9.0 | 2.1 |
| Head Start | 2.6 | .6 |

(II, 5-3 & 5-4)

Per Capita Use of Care*

- total care per week -- On an average weekly basis, all children in the U.S. receive 8.72 hours of care among the nine principal methods. (II, 5-6)
- respondent employment status -- Per capita use of child care increases strongly with increases in hours worked per week:

| <u>Hours Worked per week</u> | <u>Per Capita Hours*</u> |
|------------------------------|--------------------------|
| None | 4.3 |
| 1-19 | 8.4 |
| 20-29 | 11.1 |
| 30-49 | 20.7 |
| 50 & up | 25.5 |

(II, 5-15)

* Statistics are presented as the mean number of hours that care is received per week by each child under fourteen in the U.S. Data on hours were only gathered for the nine principal methods. Consider the following example for a precise interpretation of per capita statistics. In U.S. households where the respondents don't work, the children receive a per capita average of 4.3 hours of child care per week in at least one of the principal types of care. Per capita statistics thus exclude hours of care provided by spouse, older sibling, and so forth.

- household income -- For all types of care, per capita use of care increases with increase in household income. Two major exceptions are: middle-income children use the most (per capita) care by relatives, and low-income children use the most care in centers and Head Start. (II, 5-12)
- age of child -- Per capita consumption of care among the nine principal methods is greatest at two years old; beginning at age four, amount of care steadily decreases. This is essentially true for all types, except for before or after school programs. (II, 5-6)

4. WHO USES CHILD CARE?

Using the data on type of care that a respondent designated as main method, percent distributions of selected demographic variables are provided for each of six main methods. Percent distributions of all users and of the total U.S. population are presented for comparison.

Marital Status

| <u>Main Method</u> | <u>Percent of Respondents Using Respective Main Methods</u> | |
|----------------------------|---|--------------------|
| | <u>Married</u> | <u>Not Married</u> |
| Own home by relative | 79 | 21 |
| Own home by non-relative | 88 | 12 |
| Other home by relative | 84 | 16 |
| Other home by non-relative | 78 | 22 |
| Nursery or preschool | 80 | 20 |
| Day care center | 65 | 34 |
| All Users | 82 | 18 |
| Total U.S. Population | 82 | 18 |
| (derived from I, 4-29) | | |

Employment Status

| <u>Main Method</u> | <u>Percent of Respondents Using Respective Main Methods</u> | |
|----------------------------|---|---------------------|
| | <u>Employed</u> | <u>Not Employed</u> |
| Own home by relative | 32 | 68 |
| Own home by non-relative | 32 | 68 |
| Other home by relative | 35 | 65 |
| Other home by non-relative | 63 | 37 |
| Nursery or preschool | 51 | 48 |
| Day care center | 74 | 25 |
| All Users | 41 | 59 |
| Total U.S. population | 37 | 63 |
| (derived from I, 4-29) | | |

Poverty Status

| <u>Main Methods</u> | <u>Percent of Respondents Using Respective Main Methods</u> | | |
|----------------------------|---|-----------------------|----------------------|
| | <u>Below Poverty</u> | <u>Up to 200%</u> | <u>Over 200%</u> |
| Own home by relative | 15 | 27 | 57 |
| Own home by non-relative | 5 | 17 | 77 |
| Other home by relative | 11 | 29 | 59 |
| Other home by non-relative | 9 | 20 | 71 |
| Nursery or preschool | 8 | 11 | 81 |
| Day care center | 23 | 18 | 60 |
| All Users | 11 | 23 | 66 |
| Total U.S. Population | 15 | 24 | 61 |

(I, 4-28)

Race/Ethnicity

| <u>Main Methods</u> | <u>Percent of Respondents Using Respective Main Methods</u> | | | |
|----------------------------|---|--------------|----------------|--------------|
| | <u>White</u> | <u>Black</u> | <u>Spanish</u> | <u>Other</u> |
| Own home by relative | 76 | 13 | 6 | 5 |
| Own home by non-relative | 93 | 4 | 2 | 2 |
| Other home by relative | 77 | 15 | 6 | 2 |
| Other home by non-relative | 79 | 14 | 3 | 5 |
| Nursery or preschool | 72 | 21 | 3 | 4 |
| Day care center | 59 | 24 | 6 | 12 |
| All Users | 80 | 12 | 4 | 4 |
| Total U.S. Population | 75 | 14 | 5 | 5 |

(I, 4-30)

5. WHAT DO PEOPLE PAY?

For each of the nine principal types of care used, the average weekly expense was obtained. Payment through exchange of services or favors was also recorded.

Mode of Compensation

- compensation by type -- Compensation is usually in cash (rather than services or no compensation) for users of centers, nursery schools and non-relatives in the children's own homes:

| <u>Type of Care</u> | <u>Percent of Respective Users Paying Cash</u> |
|----------------------------|--|
| Own home by relative | 16 |
| Own home by non-relative | 81 |
| Other home by relative | 12 |
| Other home by non-relative | 43 |
| Nursery or preschool | 79 |
| Day care center | 79 |

(derived from II, 7-5)

Cost of Child Care

- total U.S. expenditure -- An estimated \$6.3 billion is spent on day care each year. (II, 8-5)
- distribution of day care dollars -- 55% of all the dollars are paid to home-based, unrelated providers, 18% to related providers (though they provide almost one-half the child care hours) and 25% paid to nursery schools and day care centers. (II, 8-5)
- total weekly cost per household -- 47% of all households using one of the principal types of care (regardless of number of hours used) do not pay for their child care, 22% pay less than \$10.00, 31% pay \$10.00 or more per week. (I, 6-3)

● average weekly cost by type --

| <u>Type of Care</u> | <u>Mean Weekly Cost*</u> |
|----------------------------|--------------------------|
| Own home by relative | \$ 10.52 |
| Own home by non-relative | 7.78 |
| Other home by relative | 14.24 |
| Other home by non-relative | 16.07 |
| Nursery or preschool | 14.59 |
| Day care center | 19.56 |
| Overall mean | \$ 14.73 |

(II, 8-8)

● mean cost per child care hour -- Relatives are paid less per child care hour, as are all home-based types (when compared to centers and nursery schools):

| <u>Type of Care</u> | <u>Mean Cost per Child Care Hour**</u> |
|----------------------------|--|
| Own home by relative | \$.35 |
| Own home by non-relative | .53 |
| Other home by relative | .39 |
| Other home by non-relative | .54 |
| Nursery or preschool | .66 |
| Day care center | .57 |
| All methods | .51 |

(II, 8-7)

* Only households purchasing the respective type of care are included when computing mean weekly care. The high cost for care by a relative in the child's own home (\$10.52) would indicate that the care is only paid for when used for a large number of hours per week.

** Computed by dividing total weekly cost for a type of care by the sum of hours for all children receiving care in that type (e.g., two children for five hours each totals ten service hours). The provider hourly rate will typically be higher for care involving more than one child. Households not paying for use of a type of care are not included in computing mean cost for that type.

6. WHY DO PEOPLE USE CHILD CARE?

All those who use at least one of the nine principal types of care, regardless of number of hours were asked for all reasons why child care is used and then for the most important reason.

Reasons for Using Child Care

- most frequent means -- To work or to go out casually are the two most frequently given reasons for using day care.
- child-related reasons -- Though often given, child-related reasons are rarely the most important.

| <u>Reasons</u> | <u>Percent of All Users</u> | |
|------------------------------|-----------------------------|-----------------------|
| | <u>All Reasons</u> | <u>Most Important</u> |
| Work or looking for work | 42 | 35 |
| Going out (social, shopping) | 67 | 33 |
| School preparation | 14 | 3 |
| Child independence | 22 | 3 |
| Socialization | 23 | 5 |
| (III, 2-6) | | |

7. WHAT ARE PARENT PREFERENCES FOR DIFFERENT TYPES OF CARE?

In each instance of using care, respondents were asked for their level of satisfaction on a four-point scale.* After establishing a respondent's main method of care (where applicable), these users were asked whether they would prefer to change to some other type. Those responding positively were asked for their preferred type of care. Also, several attitude statements were presented, with responses elicited using a five-point scale of agreement/disagreement.**

General Satisfaction

- satisfaction by type of care -- Parents report being either satisfied or very satisfied with their child care arrangements. For even the least satisfactory type, of the users of that type were either satisfied or very satisfied. (III, 3-4)
- overall satisfaction -- Of all respondents, 86% agreed with the statement, "I am happy with the person or place who takes care of my child." (III, 3-2)

Preference to Change

- general preference to change -- 76% of respondents using at least one of the nine principal types indicated that they would not prefer to change their main method. (III, 3-12)
- frequency of changing main method -- During the past year, 90% did not change their main method of care. (I, 5-20)

* The scale is comprised of: very satisfied, satisfied, not completely satisfied, dissatisfied.

** This scale is comprised of: strongly agree, agree, neutral, disagree, strongly disagree.

Preference for Types of Care

- main method preference -- Among the six most used main methods, other home by non-relative is preferred least and nursery or preschool preferred the most:*

| <u>Main Method</u> | <u>Percent Users of Respective Main Methods Interested in Changing From That Method</u> | <u>Percent of All Users Interested in Changing Their Main Method</u> |
|----------------------------|---|--|
| Own home by relative | 19 | 14 |
| Own home by non-relative | 24 | 16 |
| Other home by relative | 27 | 6 |
| Other home by non-relative | 32 | 3 |
| Nursery or preschool | 16 | 24 |
| Day care center | 20 | 21 |

- types considered but not used -- When asked to indicate up to four types of care previously considered, 49% of all responses were nursery/preschool or day care centers.

(derived from III, 4-12)

* More specifically, the smallest percentage of parents preferring to change were users of nursery school as a main method (16%). Among all those preferring to change, the most desired type of care was nursery or preschool (24%).

8. WHAT ARE THE FACTORS THAT PARENTS CONSIDER IN MAKING DECISIONS ABOUT CHILD CARE?

The survey included six different sets of data that relate to factors involved in decision making: (1) the seven major factors (rank ordered) that entered into their decisions for the types currently used; (2) the least important selection factor; (3) all their reasons for changing their main method during the past year; (4) the important reasons for discontinuing previous use of up to four types of care; (5) the most important reasons for not using up to four types of care that were previously considered; and (6) several attitude statements that include general factors for using (versus not using) day care and specific factors relating to individual types of care.

Selection Factors

- most important factors -- The most important selection factors are: caregiver reliability or training, "warm and loving," a clean and safe place, and a type of care that the child likes. Given below are the rankings of five most frequently given factors:

Ranks for the Top Five Selection
Factors by Type of Care

| Factor | Own Home** | Other Home | Center or Nursery School |
|-------------------------------|------------|------------|--------------------------|
| Things are clean and safe | | 3 | 3 |
| Warm and loving caregiver | 2 | 2 | 2 |
| Discipline given when needed | 4 | 5 | |
| Experienced caregiver | 5 | | |
| Child likes this type of care | 3 | 4 | 4 |
| Planned/supervised group play | NA | | 5 |
| Well trained staff | NA | NA | 1 |
| Reliable/dependable caregiver | 1 | 1 | NA |

(III, 4-16, 17 & 18)

* The average length of list included thirty factors.

** Respondents were actually asked for factors in selecting the caregiver, rather than the setting.

NA Indicates that factor not included in list for this type of care.

- previous considerations -- Cost is the predominant reason for not using types of care previously considered (about half the time the types considered were nursery/preschools or day care centers). Other frequently given reasons are availability and transportation (care by relatives), provider reliability (own home by non-relative), "didn't like provider" (other home by non-relative), and child too young (nursery/preschool). (III, 4-12)

Reasons for Discontinuing Care

- most recent main method -- Aside from "Other," the most frequently given reasons for changing main method are provider no longer available (19%), respondent stopped working (13%), too expensive (10%), and didn't like provider (10%). (III, 4-3)
- methods previously used -- The most frequently given reason for discontinuing use in eight out of nine principal methods* is "child too old" (the highest being 64% in nursery/preschool). Other reasons were provider availability and respondent having moved (care by relatives), and stopped working (centers and other home by non-relative). (III, 4-6)

* The exception is care in-or before or after school program.

9. WHAT SHOULD BE THE PUBLIC'S ROLE IN CHILD CARE?

The questionnaire included items on general involvement, payment mechanisms, program support options, standards, and ratios.

General Involvement

- involvement with programs -- 16% of all respondents agreed that "The government should not be involved in programs to take care of children." (III, 6-2)
- having taxes raised -- 50% of all respondents were either neutral or in agreement with "I would be willing to have my taxes raised in order to support child care activities."* (III, 6-5)

Payment Mechanisms

- method for cash payments -- When forced to choose between options, 75% of all respondents preferred that "child care funds" be used to make cash payments direct to the provider rather than through working parents. (III, 6-7)
- sliding fee scales -- 82% of users preferred sliding fee scales versus either having child care be free or having parents pay all the costs of the care they use. (III, 6-9)

Support for Different Programs

- program options -- When given the opportunity to select and rank order possible programs to be supported by "child care funds," respondents using one of the principal types most frequently preferred supporting referral services for information on "screened and qualified" providers. As first choice, the two most frequently selected programs were referral service (32%) and assistance to establish new facilities (17%). (III, 6-15)

* More specifically, 4% strongly agreed, 26% agreed, and 20% were neutral.

Licensing

- use of licensed facilities -- Among those using the respective types of care, 84% use licensed day care centers, 81% use licensed nursery or preschools; and 10% use licensed family day care (other home by non-relative). * (derived from I, 4-40, & 4-70) Of those paying cash to family day care providers, 17% of the respondents use licensed providers. (II, 7-14)
- general attitude toward licensed providers -- 25% of all respondents agree that "...everyone who takes care of children should be licensed." (III, 6-17) However, 45% of all users answered "Yes" to the following question specifically about in-home providers:

Do you think there should be personal qualifications set for non-related people who care for children in the children's home?
In other words, should sitters be required to pass health exams, educational requirements or meet some other kind of standard if they were providing care in your home?

(III, 6-16)

* Due to a relatively high non-response rate, as well as other factors, their estimates should be considered as conservative.

Standards

- aspects of care that should be regulated by standards -- Users are highly in favor of regulating centers and nursery schools, though more selective in regard to someone else's home. The following percents indicate proportion of all users who support regulating the respective aspects:

Percent of All Users

| <u>Aspects</u> | <u>Someone Else's Home</u> | <u>Center or Nursery School</u> |
|--|--------------------------------|-------------------------------------|
| Fire and building safety | 67 | 94 |
| Facility cleanliness and sanitation | 78 | 94 |
| Staff-child ratio | 62 | 86 |
| Staff training and qualifications | 44 | 88 |
| Food and nutrition | 63 | 88 |
| Program content and activities | 36 | 81 |
| Space per child, physical surroundings and equipment | 47 | 81 |
| Counseling and referral services for family and child problems | 26 | 69 |
| Health conditions of staff and children | 59 | 89 |

(III, 6-20)

ANALYTICAL HIGHLIGHTS

Consumers

No matter how the term "user" is defined, there are three factors that strongly influence the likelihood of using one of the nine principal types of child care:

- Households with younger children are more likely to use care than households with only older children.
- Households composed of employed parents are more likely to use more care than households with at least one parent who is not employed.
- Single-parent households are more likely than two-parent households to use care.

The importance of these factors as predictors of child care usage is most dramatic when comparing specific subgroups. For example, when looking at center care (and excluding very occasional usage), a pre-school child with a single, employed parent is about thirty times more likely to receive care than a child in a two-parent family where only one is employed. Furthermore, the child of a single, employed parent is more than twice as likely to use center care than the child of a two-parent household where both parents are employed.

Of the many variables studied, these three are by far the dominating factors in predicting usage and tend to control other differences attributable to such variables as race/ethnicity and educational attainment. Even household income is largely subsumed as a dominant factor except to the extent that the number of employed parents is highly associated with the amount of household income. Single-parent households are more common among low-income households, but unemployment is also relatively high.

In concluding that age of child, employment status and marital status determine use of child care, the study thus validates what most would say constitutes the need for child care services. It is hardly controversial to maintain that younger children, employed parents, and single parents have greater need for these services.

Types of Care

The schedules by which consumers use the four home-based types of care are distributed broadly in all respects. Home-based care is used at varying times during the day and evening, is composed of a mixture of weekdays and weekends, and the schedule of use tends to be irregular and unpredictable. Contrasted to this are users of centers, nursery schools, and Head Start programs, where care is usually received on a half- or full-day basis, during the week, and according to a fixed schedule.

This characterization of usage schedules among types of care is altogether different when the many casual users of home-based types are factored out. Simply stated, there are no particular types of care that predominate among the more "substantial" users. Therefore, when thinking about care for children of working mothers, for example, it is patently incorrect to assume that these mothers will use day care centers, family day care homes, or any other particular type of "market care." Relatives and in-home caregivers do provide substantial portions of the care that is given on a full-time and regular basis.

Cost of Care

Both marital and employment status have distinct relationships with money paid for child care. In per capita terms (i.e., cost per capita in the population), employed mothers spend about five times as much on child care as their counterparts who are not employed. Among those paying for care, the mean cost of employed mothers is more than twice that of unemployed respondents.

Furthermore, when controlling for employment status, single parents tend to pay more per week both on a per capita and mean cost basis. The differences are most dramatic for care in the user's own home. When looking at mean weekly cost to those who pay, employed mothers who are single pay about 50% more per week than their married counterparts. Among unemployed mothers, single parents who pay for care in their own homes by relatives do so at a rate that is more than three times the mean cost for their married counterparts.

The observed mean weekly cost to paying households is about \$15.00. For respondents who are employed full-time, the mean is just under \$24.00 per week. Only about one in ten of the paying users spend \$35.00 or more per week. Furthermore, the median of what respondents claimed would be the maximum they would be able to spend corresponds to the overall mean of \$24.00 that is actually being spent. Based on costs alone, it is reasonable to suspect that most people do not and could not pay for day care either that meets federal standards for staffing and services or that is offered in fully-costed centers where there are no donations of staff time, space, or equipment.

Government Role

There are several indications that parents with children under fourteen favor a government role in day care, though apparently with some reservations. In response to one item in the survey, the general attitude favors government "involvement," but about half would be unwilling to have their taxes increased to support child care activities. Nine out of ten favored a sliding fee scale or universally free day care, which could be interpreted as favoring government involvement.

Regarding standards, users of centers and nursery schools strongly favored regulation of various aspects that are presently included in the federal standards. Support for regulation of certain aspects of care in someone else's home received much less support, though there was majority support for safety, cleanliness, ratios, food and nutrition, and health conditions of staff and children. Interestingly enough, compared to users in general, users of care in someone else's home were slightly less favorable to regulations, whereas center and nursery school users were somewhat more favorable to regulation.

Respondents who use some form of care were asked about acceptable numbers of children per adult in someone else's home and in centers or nursery schools. Among all users, only those with children in the respective age groups

(0-2, 3-5, 6-9, 10-13) were asked for ratios. Generally, users of these two settings were more lenient (i.e., accepting of more children per adult) than all users in general. Between the two types of care, lenient ratios are more acceptable in centers and nursery schools than in private homes. When compared to federal staffing standards (although the data is not strictly comparable), there is substantial agreement with the ratios for homes but considerably less for day care centers and nursery schools.

Support for licensing is less strong than other indicators of government involvement in day care. Well over one half of all respondents do not favor licensing for "everyone" who cares for children, a proportion which is even greater for users of care in other homes by non-relatives. This is somewhat confirmed by the relative lack of interest in spending "child care funds" on a "monitoring system to check on caregivers and facilities."